

IDAHO PART-YEAR RESIDENT & NONRESIDENT INCOME TAX RETURN

2001

Amended Return ☐See instructions page 10, for THE REASONS
FOR AMENDING, and enter the number. ☐

A R F W M

For calendar year 2001, or fiscal year beginning _____, ending _____

Use IDAHO label. Otherwise, please print or type.	Your first name and initial		Last name		Your Social Security Number	
	Spouse's first name and initial		Last name		Spouse's Social Security Number	
	Address (number, street and apartment number)					▲ IMPORTANT! ▲ You must enter your SSN(s) above.
	City, State and Zip Code					

Do you need Idaho income tax forms mailed to you next year? ☐ Yes ☐ No

Residency status

Check one for yourself
and one for your spouse
if a joint return.1. Yourself
2. Spouse

Resident

1. ☐
2. ☐

Idaho Resident on Active Military Duty

2. ☐
3. ☐

Nonresident

3. ☐
4. ☐

Part-Year Resident

4. ☐
5. ☐

Military Nonresident

5. ☐
6. ☐Full months in Idaho this year ☐ Yourself _____☐ Spouse _____

Filing status

If filing married joint or separate
return, enter spouse's name and
social security number above.

1. ☐ Single
2. ☐ Married filing joint return
3. ☐ Married filing separate return
4. ☐ Head of household
5. ☐ Qualifying widow(er)

6. Exemptions Enter the same number
claimed on federal return.

- a. ☐ Yourself { If parents, or someone
b. ☐ Spouse else, can claim you (or
c. ☐ Other dependents your spouse) as
d. ☐ Total exemptions dependents, enter "0").

Election campaign fund

I want \$1 of my income tax to go to the Idaho
Election Campaign Fund (\$2 on joint return).

7. Yourself 8. Spouse

Constitution ☐ ☐Democratic ☐ ☐Libertarian ☐ ☐Natural Law ☐ ☐Reform ☐ ☐Republican ☐ ☐No Specific ☐ ☐None ☐ ☐

IDAHO INCOME. See instructions, page 10.		Idaho Amounts	
9. Wages, salaries, tips, etc. Attach Form(s) W-2.	9		00
10. Taxable interest income. Attach federal Schedule B if over \$400.	10		00
11. Dividend income. Attach federal Schedule B if over \$400.	11		00
12. Alimony received	12		00
13. Business income or (loss). Attach federal Schedule C or C-EZ.	13		00
14. Capital gain or (loss). If required, attach federal Schedule D.	14		00
15. Other gains or (losses). Attach federal Form 4797.	15		00
16. IRA distributions (taxable amount)	16		00
17. Pensions and annuities (taxable amount)	17		00
18. Rents, royalties, partnerships, S corporations, trusts, etc. Attach federal Schedule E.	18		00
19. Farm income or (loss). Attach federal Schedule F.	19		00
20. Unemployment compensation	20		00
21. Other income. Attach explanation.	21		00
22. TOTAL INCOME. Add lines 9 through 21.	22		00
IDAHO ADJUSTMENTS. See instructions, page 11.			
23. Deductions for IRAs and medical savings accounts	23		00
24. Moving expenses. Attach federal Form 3903 or 3903-F.	24		00
25. Deductions for self-employment tax, health insurance and retirement plan	25		00
26. Penalty on early withdrawal of savings	26		00
27. Deductions for student loan interest and alimony paid	27		00
28. TOTAL ADJUSTMENTS. Add lines 23 through 27.	28		00
29. ADJUSTED GROSS INCOME. Subtract line 28 from line 22.	29		00

- ☐ Within 180 days of receiving this return, the Idaho State Tax Commission may contact the paid preparer to discuss it.
Under penalties of perjury, I declare that to the best of my knowledge and belief this return is true, correct and complete.

SIGN HERE	Your signature	Date	Paid preparer's signature	Preparer's EIN, SSN, or PTIN
	Spouse's signature (if a joint return, BOTH MUST SIGN)	Daytime phone	Address and phone number	

MAIL TO: Idaho State Tax Commission, PO Box 56, Boise, ID 83756-0056

ATTACH A COMPLETE COPY OF YOUR FEDERAL RETURN.

		Column A - Total		Column B - Idaho	
ADJUSTMENTS	30. Enter amount from federal Form 1040, line 33, 1040A, line 19, or 1040EZ, line 4 in Column A. Enter amount from line 29 in Column B.	30	00		00
	31. Additions from Form 39NR, Part A, line 4.	31	00		00
	32. Income after additions. Add lines 30 and 31.	32	00		00
	33. Subtractions from Form 39NR, Part B, line 24	33	00		00
	34. TOTAL ADJUSTED INCOME. Subtract line 33 from line 32.	34	00		00
35. a. Check if age 65 or older <input type="checkbox"/> Yourself <input type="checkbox"/> Spouse b. Check if blind <input type="checkbox"/> Yourself <input type="checkbox"/> Spouse c. If your parent or someone else can claim you as a dependent, check here and enter zero on lines 40 and 67. <input type="checkbox"/>					
Standard Deduction For Most People Single: \$4,550 Head of Household: \$6,650 Married filing Jointly: \$9,100 Married filing Separately: \$3,800 Qualifying Widow(er): \$7,600	36. Itemized deductions. Attach federal Schedule A. Federal limits apply.	36			00
	37. All state and local income taxes included on federal Schedule A, line 5	37			00
	38. Subtract line 37 from line 36.	38			00
	39. Standard deduction. See instructions, page 12, if you checked any boxes on line 35.	39			00
	40. Multiply \$2,900 by the number of exemptions claimed on line 6d. Federal limits apply.	40			00
	41. Add line 40 and the LARGER of line 38 or line 39.	41			00
	42. Idaho percentage. Divide line 34, Column B, by line 34, Column A.	42			%
	43. Multiply amount on line 41 by the percentage on line 42 and enter the result here.	43			00
	44. Idaho taxable income. Subtract line 43 from line 34, Column B.	44			00
	45. TAX from tables or rate schedule. See instructions, page 26.	45			00
	46. Income tax paid to other states. Attach Form 39NR and other state return.	46			00
	47. Credit for contributions to educational entities	47			00
	48. Investment tax credit. Attach Form 49. Earned <input type="checkbox"/> Allowed <input type="checkbox"/>	48			00
	49. Credit for contributions to youth and rehabilitation facilities	49			00
	50. Credit for production equipment using post-consumer waste	50			00
	51. Natural resources conservation credit	51			00
	52. Promoter-sponsored event credit	52			00
53. Credit for qualifying new employees. Attach Form 55. Earned <input type="checkbox"/> Allowed <input type="checkbox"/>	53			00	
54. Credit for Idaho research activities. Attach Form 67. Earned <input type="checkbox"/> Allowed <input type="checkbox"/>	54			00	
55. Broadband equipment investment credit. Attach Form 68. Earned <input type="checkbox"/> Allowed <input type="checkbox"/>	55			00	
56. Incentive investment tax credit. Attach Form 69. Earned <input type="checkbox"/> Allowed <input type="checkbox"/>	56			00	
57. Electronically filed return credit					
58. Line 45 minus lines 46 through 57. If less than zero, enter zero.	58			00	
OTHER TAXES See page 14	59. Fuels tax due. Attach Form 75.	59			00
	60. Sales/Use tax due on mail order, Internet, and other nontaxed purchases	60			00
	61. Tax from recapture of Idaho investment tax credit. Attach Form 49R.	61			00
	62. Permanent building fund. Check the box if you are receiving Idaho public assistance payments. <input type="checkbox"/>	62		10	00
	63. TOTAL TAX. Add lines 58 through 62.	63			00
DONATIONS See page 15	64. I wish to donate to the Nongame Wildlife Conservation Fund.	64			00
	65. I wish to donate to the Children's Trust Fund/Child Abuse Prevention.	65			00
	66. TOTAL TAX PLUS DONATIONS. Add lines 63 through 65.	66			
PAYMENTS See page 15	67. Grocery credit. Nonresidents do not qualify. See instructions, page 15.	67			00
	68. Maintaining a home for family member age 65 or older, or developmentally disabled. From Form 39NR.	68			00
	69. Special fuels tax refund _____ Gasoline tax refund _____ Attach Form 75.	69			00
	70. Idaho income tax withheld. Attach Form(s) W-2.	70			00
	71. 2001 Form 51 payment(s) and amount applied from 2000 return	71			00
	72. TOTAL PAYMENTS AND OTHER CREDITS. Add lines 67 through 71.	72			00
AMENDED RETURN page 16	AMENDED RETURN ONLY. (Skip this step if you are not filing an amended return.)				
	73. Tax paid with or after the filing of the original return.	73			00
	74. Overpayment, if any on original return or as adjusted.	74			00
	75. Amended return — total payments and credits — subtract line 74 from the total of lines 72 and 73.	75			00
Original Return: If line 66 is more than line 72, GO TO LINE 76. If line 66 is less than line 72, GO TO LINE 79.					
Amended Returns: If line 66 is more than line 75, GO TO LINE 76. If line 66 is less than line 75, GO TO LINE 79.					
REFUND / TOTAL DUE See page 16	76. TAX DUE. Subtract line 72 (or line 75 if amended return) from line 66.	76			00
	77. Penalty <input type="checkbox"/> Interest from the due date <input type="checkbox"/> Enter total	77			00
	Check box if penalty is due to an ineligible withdrawal from an Idaho medical savings account. <input type="checkbox"/>				
	78. TOTAL DUE. Add lines 76 and 77.	78			00
	79. OVERPAID. Line 72 (or line 75 if amended return) minus lines 66 and 77.	79		00	
	80. REFUND. Amount of line 79 to be refunded to you.	80		00	
	81. ESTIMATED TAX. Amount of line 79 to be applied to your 2002 estimated tax.	81			00